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UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b)) Attorney Docket No. 0100.9901420 Total Pages 108 First Inventor or Application Identifier Branko Kovacevic Title METHOD FO DISPLAYING DATA Express Mail Label No. EL394829755US

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APPLICATION ELEMENTS	ADDRESS TO: Assistant Co	ommissioner for Patents		
See MPEP chapter 600 concerning utility patent	Box Patent A			
application contents.	Washington	, DC 20231		
1. Fee Transmittal Form (Submit an original, and a duplicate for fee processing) 2. Specification Total Pages 63 (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. Drawings (35 USC 113) Total Sheets 38 4. Oath or Declaration Total Pages a. Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below] i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	5. Microfiche Compute 6. Nucleotide and/or A Submission (if applicable, a a. Computer Reada b. Paper Copy (ide c. Statement verify copies ACCOMPANYING AP 7. Assignment Paper 8. 37 CFR 3.73(b) St (when there is an as 9. English Translation 10. Information Disclos Statement (IDS)/PT0 11. Preliminary Amend 12. Return Receipt Po (Should be specific	er Program (Appendix) Amino Acid Sequence all necessary) able Copy Intical to computer copy) ing identity of above PPLICATION PARTS S (cover sheet & document(s)) atement Power of asignee) Attorney In Document (if applicable) sure Copies of O-1449 IDS Citations dment Instruction (MPEP 503) Cally itemized) Statement filed in Prior Application, Status still proper and desired. Priority Document(s)		
16. If a CONTINUING APPLICATION, check application Divisional Continuation- Prior Application Information: Examiner 17. CORRESPON Customer Number or Bar Code Label		ation No:		
Markison & Reckamp, P.C. P.O. Box 06229 Wacker Dr. Chicago, II 60606-0229 Telephone:312-939-9800 Facsimile: 312-939-9828				
Name (Print/Type) J. Gustav Larson	REGISTRATION NUMBER	39,263		
Signature	Date_	1/21/00		
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